SERVICE CODE REQUIREMENTS:

General Description:

Personal Assistance services (PAC) refer to the provision of personal assistance and supportive services, specific to the needs of a medically stable, individual who is capable of directing his/her own care or has a surrogate available to direct the care. This service is intended to reinforce an individual's strengths, while substituting or compensating for the absence, loss, diminution, or impairment of physical or cognitive functions. Services will be outlined in the individual support plan (ISP) and will not duplicate other covered waiver supports.

Personal assistance services are provided on a regularly scheduled basis and are available to individuals who live alone or with roommates. Services may be provided in the recipient's place of residence or in settings outside the place of residence.

Population Served:

The Contractor will serve children and adults currently receiving services from DHS/DSPD with mental retardation and related conditions (MR.RC), and adults age 18 and older with acquired brain injury (ABI) or physical disabilities (PD), as defined in Utah Administrative Code R539-1. (http://rules.utah.gov/publicat/code/r539/r539.htm).

Contractor's Qualifications:

Contractor shall have all applicable licenses as prescribed in Utah Administrative Code R501 to operate and provide the particular type of services being offered and comply with insurance requirements and any local ordinances or permits. A non-licensed contractor shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in accordance with Utah Code § 62A-5-103.

Contractor shall be enrolled as an approved Medicaid Provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Administrative Requirements

- A. <u>Policies and Procedures</u>: Contractor shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each program site (person's home). These policies and procedures shall:
 - 1. Demonstrate the development and posting of an evacuation plan in each program site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills.
 - 2. Govern the handling, storage, disposal and theft prevention of medication.

Staff Qualifications:

All staff shall demonstrate competency (in the services covered by the contract), as determined by the Contractor. In addition all applicable education, and training shall be completed before the delivery of any supports to persons and performing any work for persons without supervision.

The Contractor shall ensure that Personal Assistance staff are trained in the Staff Training Requirements as outlined in applicable Home and Community Based Waiver, rule, statute, and contract.

Staff must pass a Bureau of Criminal Identification (BCI) background check through the DHS, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

All staff providing this service must be at least 18 years of age.

Staff Training Requirements:

The contractor and staff must meet the following:

- 1. Employees providing personal assistance services must be capable of physically completing all required tasks.
- 2. Maintain a sanitary and safe living environment in the person's home.

Direct Service Requirements:

- A. <u>Person-Centered Planning:</u> Contractor staff shall participate in and comply with the requirements of the DHS/DSPD Person-Centered Planning Process in providing services.
 - 1. The Contractor is responsible for implementing their applicable portion of the ISP's Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.
 - 2. Once the ISP/AP has been developed, the Contractor must orient the client to that portion of the plan that pertains to them and ensure the client is involved in its implementation.
 - 3. The Contractor shall develop Support Strategies for the client. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
 - 4. In the case of services that are offered on a recurring basis, the Contractor, as a member of the client's Team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the client's service/support requirements and to make adjustments as necessary based on the client's needs. However, it may meet more often as determined by the client or other members of the team.

B. <u>Health and Safety Requirements</u>

Contractor shall assure that clients receive training in ways to seek and obtain routine and acute medical, dental, psychiatric, or other health-related services, as outlined in the ISP.

Contractor staff shall assure clients receive training and assistance to:

- a. Safely follow physician orders;
- b. Know what prescribed medication is for, if the medication is the right dose, if the medication is taken properly, and know if the medication is taken according to the schedule prescribed by the client's physician; and,
- c. Document the frequency, dosage, and type of medication taken.

Contractor shall notify the Support Coordinator and Representative within 24 hours of the development of any apparent medical need for the person.

Contractor staff shall assure clients receive training and assistance to:

- a. Identify primary health care practitioners; and
- b. Obtain dental and physical examinations.

Staff Support:

PAC does not include 24-hour direct care staff support. Actual type, frequency and duration of direct care staff support will be defined in the client's ISP/AP based on the client's selected housing arrangement and assessed needs.